

## Application for support from the HE Hardship Fund 2020/21 This form can be used by the New College Swindon Accredited Higher Education Students.

Date Received: / / Stude	ent ID No.			
You Details:				
Student SurnameTelephone/Mobile	e Number			
Student Forename(s)				
Student Address				
	Postcode			
Date of Birth/	Nationality			
	Email			
Your Course:				
Title of course				
Which year of study are you in? (please tick) 1st 2nd 3rd	1			
Living Arrangements:				
Who do you live with? (please tick) Parent/Step-Parent/Guardian	Partner Independent			
Please give the names of Parents/Step-Parent/Guardian/Partner.				
A				
B				
If at home, how many children are under 18 in the household?  Brief outline of circumstances leading to your application				
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	Would you like to arrange an appointment to discuss your wider support new	eds? (please tick)	No No			
ln c	order to assess your needs we will need some supporting evidence:					
Ear	nings:		(please tic	k if provided)		
	*Student Finance England - Statement of support funding.					
	Your earnings £ NET How often £ NET (*plus two payslips)	How often	_			
	Partner/Spouse £ NET					
	* You will not be eligible for hardship funds if you do not provide this as you	must be taking advantage of a	ll available funding.			
Stu	dent expenditure:					
Student's Personal Expenditure each week should be shown including details of all outgoings and expenses: (If possible, please provide evidence - such as bills/invoices/receipts)						
	Mortgage/Rent	£ per week	£	per month		
	Utilities	£ per week	£	per month		
	Council Tax (after relief)	£ per week	£	per month		
	Additional costs relating to your course	£ per week	£	per month		
	Travel - please state method of transport	£ per weel	k £	per month		
	Childcare whilst at college	£ per wee	ek £	per month		
	Food	£ per wee	k £	per month		
	Other - must specify	£ per wee	·k £	per month		



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rect Payment Information for Student Finance (BACS)						
Student Name	_Date of Birth//					
Payments can only be made into the student's bank account						
Payee						
Name on Account Holder	(as stated on account)					
Sort Code:  Account Number:						
Roll Number*:						
* if you have a Building Society Account, enter the roll or reference number (if applicable). Enter this number exactly as it appears on your statement and include any hyphens (-) or slashes (/) that are shown as part of the number.						
Declaration						
I confirm that all the information on this form is correct and I understand that the College has the right to reclaim any funding if I am found to have provided incorrrect information or if I do not complete the course.						
I understand that the information from this form may be recorded electronically in accordance with the Data Protection Act.						
Signature: Date:/						



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### What New College Swindon does with your data:

The information you provide on this form will be used to assess if you qualify for Hardship Support and to update your personal details on New College Swindon student records system. To understand how your personal information is processed, used, your privacy rights and details of who we may share this information with, please refer to the privacy notice, which can be accessed via https://swindon.ac.uk/SwindonCollege/media/images/PDFs/SwindonCollegeandNewCollegePrivacyStatementStudents2020.pdf . Only College staff have access to the student record system.

The HE Office will contact you by post, by e-mail or by phone with the result of your application.

The form will be held in a locked filing/archive room for a period on seven years before being confidentially destroyed. Only the Finance Team and Estates will have access to the archive. If you require access to this form whilst you are at the College please contact the HE Office Team on 01793 491591.

We do not share your personal information with any other organisations.

New College Swindon does not use automated decision making to assess if you qualify for Hardship Support.

#### **Declaration:**

Please read this section carefully. If there is anything that you do not understand please contact, the College HE Office before signing. I agree to abide by the College regulations, policies and procedures, which can be accessed via https://www.swindon.ac.uk/About-Swindon-College/Policies-and-Procedures.aspx.

I agree to inform the College in writing of any change in circumstances that may affect my eligibility for Hardship funding.

I confirm that all the information on this application is correct and I understand that the College has the right to reclaim any funding if I am found to have provided incorrect information, do not complete my course, do not follow College regulations, policies and procedures. If my attendance falls below acceptable levels, I understand that any ongoing hardship payments will be suspended.

I understand that giving false or incomplete information that leads to incorrect or overpayment may result in future weekly payments / bus passes / meal vouchers being stopped and any incorrectly paid funds being recovered. I understand that this may result in a referral to the police and the possibility of prosecution.

I understand that information on this form may be recorded electronically on the New College Swindon Student Record system in accordance with the Data Protection Act 2018 and held until 30th September 2030. The data is held securely and only access by the College staff as part of their role in the College.

I agree to provide the College with a schedule of payment document issued to me by the Student Loan Company (if applicable) in order for staff to assess my eligibility for hardship funding.

Students Signature: Date:/	/
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